



Project Charter

Project Name	Health Technology Assessment - Program Implementation
Department/Program	Health Technology Assessment (HTA)
Project Goal	Develop a program to implement an innovative new law that promotes good health outcomes and cost effective care by paying for health technologies that are proven to be safe and effective.
Project Sponsor	Steve Hill, HCA Administrator
Project Director	Leah Hole-Curry, HTA Program Director
Start Date	June 01, 2006
Implementation Date	December 31, 2006
End Date	December 31, 2006

1 PROJECT OVERVIEW

1.1 Purpose

This project will develop an innovative new program called the Health Technology Assessment Program (HTA), to serve as a resource for Washington State agencies that make health care purchasing or coverage decisions. HTA will contract for reports based on scientific evidence about whether certain medical devices, procedures, and tests are safe, work as intended, and are cost effective. An open and public process is used to gather information. An independent clinical committee made up of health care practitioners will use the reports and their expertise to make coverage decisions (e.g. decide whether and under what circumstances state programs should pay for the medical device, procedure, equipment, or test.).

1.2 Objective

The primary objectives of the program are:

- Promote excellent health care by investigating what works
- Make health care safer by relying on scientific evidence and a committee of practicing clinicians to make health care coverage decisions
- Make coverage decisions of state agencies more efficient and consistent – 5 state agencies are participating in the program and will rely on the same evidence based reports
- Make state purchased health care more cost effective by paying for medical tools and procedures that are proven to work
- Make the coverage decision process more open and inclusive by creating a web site to share information, holding public meetings, and publishing decision criteria and outcomes

1.3 Background

The HTA is a part of Governor Gregoire's five point strategy to improve health care in the state. One of the five strategies, and the focus of HTA, is to rely on scientific, or evidence-based, information about safety and effectiveness to inform health care coverage decisions and improve quality. "The goal is to eliminate costly, ineffective and dated treatments that either have been shown to be unsafe, not to work, or have been replaced with better treatments – even more expensive ones, if necessary, to get the quality needed."

State agencies currently face the same questions about which technologies (medical devices, procedures, equipment and tests) to cover. Agencies use redundant resources to resolve these issues in a number of different ways: by relying on their agency resources' professional judgment based on review of current and available research, studies, technology assessment determinations of other entities, expert/specialist opinions, and/or specialty society positions. The HTA will provide a centralized source for health care coverage decisions on technologies that is based on a third party, systematic review of scientific evidence. Using the same, evidence-based reports will produce more informed and consistent coverage decisions.

2 PROJECT SCOPE

The implementation of the HTA program requires five principal activities: 1) Solicit stakeholder input and maintain stakeholder relations through communications and open forums, 2) Establish the program infrastructure to support program activities, 3) Contract with a qualified evidence-based practice center (EPC) for impartial, systematic reviews of evidence for the safety and effectiveness, 4) Establish an independent committee of practicing health care providers to review the reports and make health care coverage decisions, 5) Develop an open process for nominations of health technologies and information gathering about selected technologies.

2.1 Project Deliverables and Timeline

- 1. Stakeholder Input** **July – December 2006**
 - Actively solicit input from key sponsors of legislation
 - Hold periodic open forums to receive key stakeholder input
 - Develop web page and disseminate information through web posting and email notifications
- 2. Establish program infrastructure** **July – October 2006**
 - Staffing the Administrative, Data Analyst, and Medical Consultant positions
 - Internal Workgroups – Medical Director Advisory Group
 - IT infrastructure to support a centralized location for state agencies to share information on other health care coverage decisions
- 3. Contract with an EPC** **July – November 2006**
 - Release RFP
 - Select Vendor(s)
 - Execute Contract
- 4. Staff clinical committee** **July – November 2006**
 - Draft by-laws
 - Establish criteria and terms
 - Recruit committee chair and members
 - Execute contract with committee members
 - Train committee members
- 5. Develop Rules and Policy** **July – December 2006**
 - Draft rules and/or policy for program processes, committee governance, and technology selection and criteria

Implementation: Select first 3 Technologies

January 1, 2007

2.2 Project Resources

Project Participants

Role	Authority and Responsibilities
Project Sponsor Steve Hill, HCA Administrator	Executive level project sponsor; champions project; provides strategic direction and oversight; approves project charter and overall directives and changes; resolves escalated issues; monitors progress; and ensures Agency level business needs are aligned; receives direct reports from Project Manager.
Project Manager Leah Hole-Curry, HTA Program Director	Provides project, scope, communication, schedule, and risk management. Manage project and project team on a day-to-day basis; review project status, budget, staff assignments and resource needs, develops initial and updated project planning documents. Responsible for quality execution of the project tasks in the specified time frame with allocated resources. Primary liaison to sponsor, key stakeholders, and Project workgroup for status, draft deliverable content, and other reports. Prioritize, resolve, and escalate appropriate issues, and implement sponsor directives.
Project Coordinator	Provides administrative support, meeting and scheduling coordination; collect and organize project materials; participate in status meetings; track and document status and issues, monitors and updates schedule; provides schedule status and task updates; coordinates project team and workgroup member activities.
Project Team Members (Data Analyst, Medical Consultant)	Performs designated tasks within project <ul style="list-style-type: none"> • Draft and review of materials and deliverables • Responds to inquiries and provides expertise in subject area • Participates in appropriate workgroups, presentations, and meetings • Develops/researches solutions • Provides technical guidance for the project and proactive outreach and communication
Organization Support (Communication, Web, Information Technology, Human Resources, Contract, Budget, Legal)	Provides agency level support to the project team for appropriate tasks <ul style="list-style-type: none"> • Draft and/or review of materials and deliverables • Provide guidance in respective support area and work with project team to resolve issues • Participates in appropriate workgroup and/or meetings • Develops/researches solutions • Provides technical guidance for the project
Legal Support	Assistant Attorney General provides legal analysis, guidance and assistance to the project.
AMDG HTA Workgroup	Includes an agency or program liaison from participating agencies/programs and provides consultation to the project. Provides clinical and agency health care purchasing subject matter expertise. Reviews and provides expert feedback on key deliverables and project decision points, participates in bi-weekly workgroup meetings. For implementation, serves as the source for agency consultation and recommendation of technologies.

3 PROJECT ASSUMPTIONS and CONSTRAINTS

3.1 Assumptions

- The HTA implementation project is a top priority for HCA and the AMDG HTA Workgroup
- The law governing the program will not change in the first year
- Compliance with the law that created the program is mandatory
- The implementation project must be complete in time to support the first three technologies selected by January 1, 2007
- HTA program staff will focus on the program implementation project tasks through January 1, 2007
- The program's budget for the first year is sufficient for anticipated expenses and will not change (+/-)

4 APPROVALS

Prepared by Leah Hole-Curry
Project Manager – HTA Program Director

Approved by Steve Hill
Project Sponsor – HCA Administrator